



OCTOBER — DECEMBER
1980



RETURN TO BASEMENT

Ontario Dental Nurses & Assistants Association



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(Submitted to the Editor BEFORE THE ABOVE DATE)

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THE OPINIONS EXPRESSED IN THE ARTICLES ARE THOSE OF THE AUTHOR AND DO NOT NECESSARILY REPRESENT THE VIEWS OF THE ONTARIO DENTAL NURSES AND ASSISTANTS ASSOCIATION OR THE EDITOR.

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Ontario Dental Nurses & Assistants Association



EDITORIAL

Welcome to the beginning of another season of the O.D.N. & A.A. In my post convention editorial I made a special request for some of our non-participating members to participate in our Journal. I would like to say that I'm pleased with the response that I've received since that request. It is reassuring to gain what we have been hoping for . . . membership participation. I hope that it is not short lived. I'm depending on you to follow suit and submit something yourself. Keep in mind that there is the journal competition each year for members. A selection is made by the Journal Committee, for the best journal article submitted between June 1980 and April 1981. You could be one of the winners at the May convention receiving one of the beautiful trophies. Please send two (2) copies of your Journal Contest entry in order for one copy to be used if it is published in the Journal.

In the centrefold of this issue there is a photographic display presented of the new Executive members for the O.D.N. & A.A. Board of Directors and Board of Governors (Accreditation Division) 1980-81. For anyone who was at convention and saw the Executive officers installed into office, it may be confusing to see a different President-Elect and Vice-President from the time of convention. Our announcement, published in the last issue on page 15, was to clarify any confusion and to make all members aware of Mrs. Pam Gignac's resignation from the office of President-Elect. Let's all give the new Executive officers the support they need to run the O.D.N. & A.A. as smoothly as possible.

I would like to express a special welcome to all new graduate members. My goal is to make the Journal an informative guide for its members, as well as good reading. Refer to the back of your journal regularly for the Affiliated Association News and the address listings on the last two pages. You may find it necessary to contact a representative regarding a problem you may encounter, or, for some information you may wish to acquire. An attempt has been made to keep all the names, addresses and phone numbers up to date and in one area for your convenience.

In this issue please turn to page 6 for the Winter Clinic program and registration form. Remember there is also a Winter Clinic Student Day. You will find information regarding this special day on page 8. Don't delay with your advance registrations! You can save yourself a little money if you plan ahead.

Congratulations to Marilyn Beardsall of the Simcoe County Affiliate Association, who is our recent winner of the Max Hanna Lucky Draw. There is an announcement regarding the prize on this page. Watch each issue now for an entry form for the Lucky Draw, which is going to be in all of our quarterly issues.

Your new president Brenda Moffatt is a very conscientious young lady and is there at the head of your Board Room table ready to serve you. Try to give your Board Representative feedback regarding the Association's business so that your new President can work towards accommodating your needs as an affiliate member of the O.D.N. & A.A.



HEATHER A. NIKOLAEW
Editor

WINNER OF THE MAX HANNA LUCKY DRAW

for the JULY-SEPTEMBER 1980 Issue

Marilyn Beardsall, P.D.A., who is a certified member of the O.D.N. & A.A., has won an "Electrohome 12" Oscillating Fan" in our Max Hanna Lucky Draw.

Marilyn, who resides in Bradford, Ontario, works at the office of Drs. Stephens and Marko, 603 Davis Drive, Newmarket, Ontario.

The Lucky Draw gifts are donated by Mr. Max Hanna, D.T., who has office locations at:

Max Hanna Denture Therapist Clinic
1301½ Dundas Street
LONDON, Ontario

Max Hanna Denture Therapist Clinic
536 Simcoe Street
WATFORD, Ontario

Max Hanna Denture Therapist Clinic
144 Pitt Street West
WINDSOR, Ontario

Many thanks to Max Hanna, for being a kind contributor to our Association and for making the "Lucky Draw" possible.

Congratulations to our lucky winners!

THE EDITOR



PRESIDENT'S MESSAGE

Now that summer is over and we are all adjusting to the old routines, it is appropriate that we look ahead into the future.

In my last message to you, I mentioned I would be investigating the possibility of setting up a Group Insurance scheme for our membership. That investigation is now in progress and a preliminary decision will have been made by your Board of Directors by the time you read this message. I will include a complete report regarding this matter in our next publication. I must stress that in looking at the various proposals from the insurance companies solicited, it is obvious that the more members taking part in the Group Insurance, the better rate we will receive.

The formation of a "liaison committee" between the O.D.N. & A.A., the O.D.A., the R.C.D.S. and the O.D.H.A. was achieved this summer. The first meeting of the committee established the function the committee will perform in the months, and hopefully years, ahead. The primary function will be to provide a direct means of communication between the four groups. As common problems and issues arise, we will be able to share each group's information and concerns; thereby preventing many cases of misunderstanding and working at cross purposes, that have occurred in the past.

Another ongoing task your Executive is working on is the "O.D.N. & A.A. Membership Survey of Employment Standards". Due to the slow return of the questionnaire; the job of analysing the results was not completed in time for this publication. Pat Howes assures me that those results will be ready for the next issue of the Journal. The value of the survey is in direct proportion to the number of responses received and I would like to thank each person who sent in their questionnaire.

Now that our regular schedule of local affiliate meetings has resumed, I wish to stress upon each of you the absolute necessity for your individual involvement in your local affiliate. The strength of your Provincial Association depends upon the strength of each and every local affiliate... and the strength of each affiliate depends on you. It is imperative that you attend your local meetings and get involved. The more people involved, the greater the sense of sharing and accomplishment. The resulting strength on the local level will enable the provincial association to better serve you. If you have concerns regarding your Association, they will be taken to the O.D.N. & A.A. Board of Directors by your local Board Representative. In return, the Board's concerns will become known to you because you will be at the local affiliate meetings to discuss them with your Board Representative, upon her return from the Board Meetings held semi-annually usually in the months of October and February.

Looking at our Association as a Body, with the Affiliates serving as parts of the Body; I would like to leave you with this thought..."Remember, if the various parts of the Body are healthy then the health of the Whole Body is assured."



BRENDA J. MOFFATT, C.D.A.
President

CONGRATULATIONS

to
Margaret Deichert, of Kitchener
on her election to the office
of
VICE-PRESIDENT of the
Canadian Dental Nurses & Assistants Association

ATTENTION PREVENTIVE DENTAL ASSISTANTS

Many thanks to the girls who forwarded me the information I required.

In answer to the girls who questioned my statement "failure to renew your P.D.A. certification". If you have applied for accreditation as a P.D.A. and you are a member in good standing of The Ontario Dental Nurses and Assistants Association, your fee is included in your annual membership dues. 1980 fees were as follows:—

O.D.N. & A.A. Membership	\$20
Affiliate Membership	\$10
P.D.A. or C.D.A. renewal.....	\$10

If anyone has passed the P.D.A. examinations and has not yet applied for accreditation, you can do so by contacting:—

MRS. ANN PHIPPEN
O.D.N. & A.A. Headquarters
Suite 406, 345 Dixon Road,
Weston, Ontario M9R 1S6

DIANE PIKE, P.D.A.

PREVENTIVE DENTISTRY — WHICH WAY NOW?

by Paul E. Goldman, Profession Management Consultant
Barbara S. Lev, C.D.A.



Paul E. Goldman



Barbara S. Lev

The 80's present challenges in every facet of our lives. China talks about the Third World War; Japan — computer technology and industrial revolution. The West talks about energy conservation and ecology. Dentistry concerns itself with advertising, capitation, department store dentistry and government involvement.

Prevention, born again in the 60's, died in the 70's, re-emerges as a vital source and ally of the humanistic practice of the 80's. Prevention programs in Canada are moving into the new wave that Avrum King speaks of as the "3rd Tier". As the new wave moves into our practices, new and exciting opportunities abound for the professional auxiliary today. Expanded use of staff is the buzz word in practice management.

Preventive Dentistry has opened an entirely new field of dental service — one which treats the patient as a complete person with concern for his physical health and well-being as well as his dental health. The rewards from such a program are substantial for both the doctor and patient. Obviously, the patient has the most to gain from your adopting a prevention program. He gains more than just a clean mouth, good dental health and a knowledge of new techniques. He gains awareness.

Accept the philosophy of prevention and a program of control whole-heartedly with the complete confidence in the benefits that will accrue — benefits to patient, doctor and staff. You cannot present the program to any patient with enthusiasm and sincere understanding necessary for success without following the routine completely yourself. Prevention must be a way of life for each member of the office staff and must be accepted by everyone in the office. Every staff member must be under control and checked regularly. Every staff member must believe in preventive dentistry strongly enough to make it part of his own home routine. Remember to keep the details of your program somewhat flexible since the requirements for success will vary with each patient and don't hesitate to try new ideas.

Enthusiasm is contagious. Each member of your staff can easily spread the prevention message simply by being interested. A "How are you doing, Mrs. Jones?" from the receptionist can do as much to motivate a patient as a word of praise from the preventive assistant. The hygienist who tells of her initial clumsiness with floss puts a patient at ease about his own lack of dexterity. The doctor who personally gives a patient some prevention reading material will stimulate his staff as well as his patient to "think prevention".

Such office activity has its own built-in rewards. The preventive assistant, having continuing motivation and the solid backing by everyone around her, will work harder and more effectively with each and every patient she sees. The relative success or failure of that program rests not with the doctor or his patient, but with the preventive assistant — that always pleasant, always patient and understanding gal who helps others help themselves to better dental health.

Doctors often rationalize failure to get an effective prevention program going. "My patients are different, they can't be motivated," they say. Perhaps the doctors are better off saying, "It's too time consuming. I'm losing income on it." In reality what they are saying is, "Our program is a failure because we do not present prevention properly and we are not sold 100% on it."

The success of your program from this point on is based, to a great extent, on the preventive assistant's ability to help the patient break old habits and establish new ones. Once the new habit is established, chances for success over a long period, perhaps a life time, are extremely high. But, remember, the patient must motivate himself to change. If the whole family is on a home care program, encourage competition. For example, one family member can be the judge each day checking results and awarding points or rewards.

Recognizing that the patient must motivate himself, prevention must be presented with compassion and understanding for each patient as an individual. Merely leading him to prevention is not enough. The conditions must be present for him to want to "Think."

"Are you pleased with your smile?" This one question can introduce your patients to an entirely new concept in dental treatment. "Is there anything you wish to improve? Would you like us to ask the doctor if he can remedy the problem?" All these questions help you be of greater value to your doctor and upgrade your status in the eyes of your patients.

You might like to come join us at the seminar on December the 10th, 1980 at the Hotel Toronto. We'll have lunch, break bread and share some ways that you and your office can plug into the newest, up-to-date ideas. Come, let's grow together.



CANADIAN DENTAL NURSES & ASSISTANTS ASSOCIATION

NATIONAL CERTIFICATION

How Are You Doing? Will You Have Sufficient Continuing Education Points For Renewal of Your Certificate?

The following courses are being developed by the Council on Certification, C.D.N. & A.A. Certified Dental Assistants are eligible to enroll in these courses for a reduced fee. Please do take advantage of this opportunity. These courses are designed for independent study.

CONTINUING EDUCATION COURSES

THERAPEUTICS FOR DENTAL AUXILIARIES (BASIC)

Dental Auxiliaries are not responsible for prescribing or administering medicaments, however there are several areas included in Dental Therapeutics that she/he should be knowledgeable in.

The format of this basic course presents an outline of the drugs and chemicals used in the diagnosis, treatment and prevention of dental disease, including those agents used in controlling anxiety. Local anesthetics, nitrous oxide-oxygen analgesia and general anesthetic will be discussed along with certain elements pertaining to the physiological affects following administration. Considerable emphasis will be placed on the proper ordering and storage of drugs common to the dental office and on the responsibility of the auxiliary in assisting the dentist if an emergency should occur following administration. A general interest chapter on the abuse of drugs will be included.

Evaluation process: Written examination. Pass mark 65%.

Fee: C.D.N.A.A. Certified Dental Assistants \$15.00
C.D.N.A.A. members only \$20.00
Non members \$40.00

10 points of continuing education.

Includes terminology tape.

PSYCHOLOGY OF PATIENT MANAGEMENT

This program is designed to begin with a discussion on the formation of patient attitudes towards prevention and treatment which provides a basis for behaviour exhibited in the dental office. The majority of this course will deal with pedodontic patients; setting the scene, helping to create a desire for good dental health, education of parents in their role, techniques in the prevention of behavioral problems and the management techniques when a problem does exist. The adolescent patient, the aged patient and the patient with special needs are also included in the course. Communicative skills are discussed to assist you in expressing yourself both verbally and nonverbally to patients of all ages. A section of the manual will deal with the importance of a good mental attitude in your career as a dental auxiliary and the affect that your attitude has on the ability to deal with problems associated with a dental office environment.

Evaluation process: Written examination. Pass mark 65%.

Fee: C.D.N.A.A. Certified Dental Assistants \$40.00
C.D.N.A.A. members only \$45.00
Non members \$65.00

**Fee includes text book.

10 points of continuing education.

BLOOD PRESSURE AND ITS MEASUREMENT

More dental offices today are purchasing equipment for the purpose of recording the blood pressure of each patient as a part of the routine examination and then recording their findings on the medical history. The physiology of blood pressure (normal and in cases of hypertension), how to measure and record with special emphasis on the effect of an evaluated pressure in the administration of medications, particularly local and general anesthetic, are important aspects of this course. The manual is accompanied by a cuff, gauge and stethoscope for practical application of the theoretical knowledge. This course involves completing an exercise sheet in which the student will be required to take and record a designated number of blood pressures.

Evaluation process: Written examination. Pass mark 65%.
Practical evaluation. Pass mark 100%.

Fee: C.D.N.A.A. Certified Dental Assistants \$55.00
C.D.N.A.A. members only \$60.00
Non members \$80.00

*Fee includes cuff, gauge, stethoscope.

Blood pressure manual only available for \$20.00

ORDER FORM

Name: _____

Address: _____

Postal Code: _____

Course Name: _____

Total Enclosed: _____

Please send all orders to: Education Department
C.D.N. & A.A.
SS 1-1-21
Lethbridge, Alberta T1J 4B3
Please add \$2.00 for certified mail.

How to Use Your New Record of Points Folder

The new green "records of points" folder is to be utilized as follows:

1. The newly revised point system came into effect on January 1, 1980. Please begin your points using the new values as of that date.
2. It is no longer necessary that you obtain a signature on your card, however, you may do so if you wish.
3. Simply complete one of the sheets on the enclosed pad, have it stamped and attach a copy of your receipt for the function.
4. When renewing your certificate all that is required is that you send your green card and sheets to the Executive Director along with the completed renewal application and necessary fee.

REMEMBER that certificates are now renewed every three (3) years and that 50 points of continuing education are required.

Those dental assistants certified in 1972, 1975 and 1978 will be due for renewal as of January 1, 1981.

Submitted by
MARGARET DEICHERT
Certification Rep. for C.D.N. & A.A.

36TH ANNUAL WINTER CLINIC

THURSDAY, NOVEMBER 27, 1980

ROYAL YORK HOTEL — TORONTO

8:00 a.m. - 12:30 p.m.	Registration Nancy Block, C.D.A.	Outside the Ontario Room
9:00 a.m. - 9:15 a.m.	Opening Ceremonies Winter Clinic Chairperson, Liz Anderson C.D.A. O.D.N.A.A. President, Brenda Moffatt C.D.A. Academy of Dentistry, President, Dr. L. Shapira	Ontario Room
9:15 a.m. - 10:45 a.m.	Dr. Tom W. McKean, Willowdale <i>"Treatment of Injuries to the Teeth and Supporting Structures (Primary and Permanent)"</i>	Ontario Room
9:30 a.m. - 11:45 a.m.	Dr. Paul Liebau, London <i>"Adding your Unique Touch to the Practice"</i>	Manitoba Room
9:00 a.m. - 11:30 a.m.	Mr. Covert Bailey, South Lake Tahoe <i>"Nutrition, Physical Fitness and Body Fat"</i>	Ballroom
11:00 a.m. - 12:00 noon	Commercial Exhibits	Concert Hall Room B and Foyer
12:30 p.m.	Luncheon Speaker: "Red Storey"	Canadian Room
2:30 p.m. - 4:30 p.m.	Dr. Paul Liebau, London <i>"Adding your Unique Touch to the Practice"</i> — Continued	Manitoba Room
2:15 p.m. - 4:30 p.m.	Mr. Covert Bailey, South Lake Tahoe <i>"Nutrition, Physical Fitness and Body Fat"</i> — Continued	Ballroom
2:00 p.m. - 6:00 p.m.	Commercial Exhibits	Concert Hall Room B and Foyer
7:30 p.m. - 10:00 p.m.		
7:30 p.m. - 9:30 p.m.	Table Clinics	Ballroom

Pre-registration due before November 1st, 1980\$20.00
 Registration after November 1st, 1980\$30.00

Mr. Covert Bailey (an additional) — advance registration only — limited attendance.....\$ 5.00

Fee includes the Luncheon with the Doctors.

Make cheque payable to: "O.D.N. & A.A. Winter Clinic".

I will be attending the LUNCHEON _____

Amount _____

Name _____

Address _____

Receipt Issued to _____

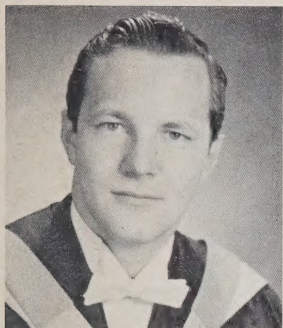
Tickets may be picked up at the Registration Desk outside the Ontario Room.

No tickets will be mailed.

Please do not remit your fee with the Doctor's registration cheque.



WINTER CLINIC SPEAKERS



Dr. Tom McKean

DR. TOM W. MCKEAN

"Treatment of injuries to the teeth and supporting structures (primary and permanent)"

Dr. McKean graduated from the University of Toronto in 1968. In 1970 he became Chief of Dentistry at North York General Hospital and Chief Dental Consultant for Ontario Blue Cross. He received the Canadian Forces Decoration in 1973 and in 1974 became a Fellow of the American Academy of General Dentistry. Dr. McKean served as Team Dentist for Team Canada in 1974.

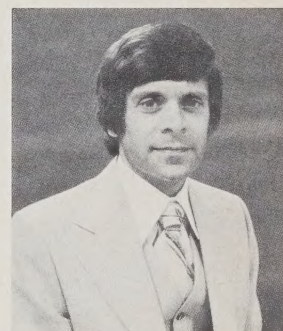
A slide presentation combining surgical and restoration methods of dental trauma will be discussed, including the following techniques: re-implantation, stabilization of alveolar fractures and subsequent endodontic and restorative procedures, as well as suturing techniques of the lips and mucosa. The technique of using a metal arch bar and the proper format for the writing of a dental legal report will be presented also.

DR. PAUL W. LIEBAU

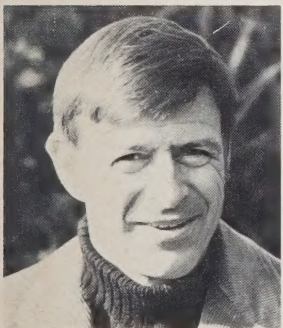
"Adding your Unique Touch to the Practice"

Paul is an instructor at Fanshawe College in London and has been leading Human Relations and Dental Hygiene classes for Dental Assisting students since 1972. He has made himself available as a counselor to private dental practices and is active in marriage counseling. He also offers short courses to Dentists and Auxiliaries on "Humanizing your Practice".

You may have heard Paul when he acted as moderator for the O.S.P.D. Preventive Players Skits at the O.D.A. last year. The Skits were fun as well as a learning experience for many of those attending. Paul was also a facilitator at the O.S.P.D. O.D.A.'s presentation to the general public in Toronto, June '78.



Dr. Paul Liebau



Covert Bailey
Author of "Fit or Fat?"

COVERT BAILEY

"Nutrition, Physical Fitness and Body Fat"

Covert Bailey has been a Class C ski racer, ski instructor, Canadian canoe guide, lumberjack, amateur tennis champion and gymnast. Taking time out from these activities, he obtained a masters degree in geology and another in foreign languages. Mr. Bailey followed this with research in physiology at Harvard and received his Master of Science degree from M.I.T. in Nutritional Biochemistry. He lectures extensively on the subject of nutrition and physical fitness adding a pleasant combination of humor and common sense to this very confusing field.

Mr. Bailey is foremost a teacher. Audiences appreciate his ability to make a difficult concept easy to understand. He will show you some of the "tricks" that he uses in teaching so that you will be better equipped to teach your patients. Motivation requires much more than a listing of rewards and consequences. "People change only when they believe, really believe."

THE FACTS

For most men and women this will be the first time they have had some meaningful information about their bodies! The result is enthusiasm! We will want to eat better, exercise better, and watch the parameters change. What we are doing is exciting, and it's fun.

Much fat is hidden internally where it cannot be seen, hidden as marbling in muscles that haven't been fully utilized over the years.

For this reason, fat, that may be quite visible on the outside, is masking even more fat on the inside. This inner fat alters many of your body functions. In addition to the obvious decrease in muscle ability, marbling also impairs heart and lung function and, worst of all, increases the rate of fat deposition, so that one gets fatter and fatter despite eating less and less.

ONTARIO DENTAL NURSES & ASSISTANTS ASSOCIATION

ACCREDITATION DIVISION

WINTER CLINIC STUDENT DAY

This year we are once again planning a Winter Clinic Student Day Program to be held on Wednesday, November 26, 1980 — the day prior to Winter Clinic. It is our hope that all DENTAL ASSISTANT STUDENTS from the Secondary Schools and the Community Colleges of Applied Arts & Technology Dental Assistant Programs will take advantage of this educational day that is being arranged for them.

The following is the program for that day.

WINTER CLINIC STUDENT DAY PROGRAM OF THE ONTARIO DENTAL NURSES & ASSISTANTS ASSOCIATION ACCREDITATION DIVISION

ROYAL YORK HOTEL, TORONTO — WEDNESDAY, NOVEMBER 26, 1980

8:30 a.m.	Registration	Ontario Room
9:15 a.m.	Opening Ceremonies O.D.N. & A.A. Accreditation Division Chairman, Margaret Deichert.	Ontario Room
9:30 a.m.- 11:45 a.m.	Dr. K. Titley Topic — <i>Paedodontics</i>	Ontario Room
12:00 Noon	Luncheon	Ballroom
2:00 p.m.- 3:00 p.m.	Panel Discussion — Dental Assistants from: General Practice Paedodontics Orthodontics Periodontics	Ontario Room
3:00 p.m.- 3:45 p.m.	Ernie Benton, Dental Industry Association of Canada Topic — <i>Maintenance and Repair of Hand Pieces</i>	Ontario Room
3:30 p.m.- 4:30 p.m.	Table Clinics	
5:00 p.m.	View Commercial Exhibits	

ONTARIO CERTIFICATION EXAMINATION

It is anticipated that we will have information on the Ontario Certification Examination by the end of September. Successful candidates for this examination will be eligible to apply for Certification in Ontario.

Anyone wishing information on this examination please write to our Executive Director at Suite 406 - 345 Dixon Road, Weston, Ontario M9R 1S6, requesting same. Your letter will be kept on file and information sent to you as soon as it becomes available.

REMINDER — RE APPLYING FOR CERTIFICATION

Candidates eligible for Certification prior to June 1, 1979 must apply for Certification before June 1, 1981 without further examination. This regulation applies to Graduates of the Dental Assistant Programs at Ontario Colleges of Applied Arts and Technology and Ontario Secondary Schools as well as the successful candidates of the Challenge Examination.



MARGARET DEICHERT, C.D.A.
Accreditation Chairman

"If anything can go wrong, it will"

— Murphy's Law

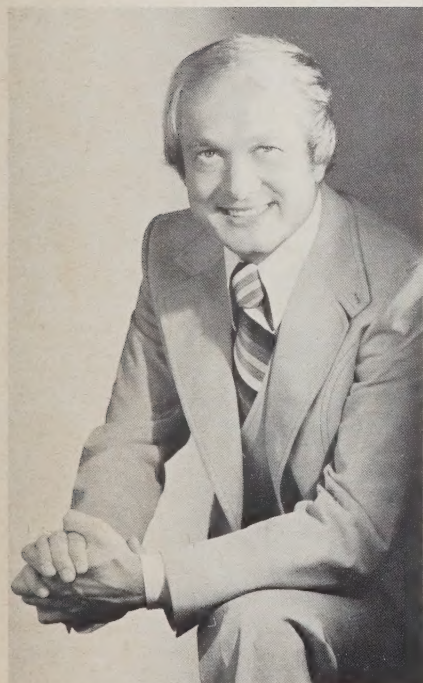
"Sometimes I feel that Murphy was an optimist!"

Randy Lang, D.D.S., D.Ortho

No one knows who Murphy was or what he did for a living. Sometimes, however, I am positive he must have been a dentist, or possibly the Dean of a dental school. On days when things go wrong, Murphy's Law seems to prevail in even the most efficient of dental offices.

I have compiled a list of unwritten "laws" that I have found apply to those of us in dental practice, and I would like to share them with you. Sometimes I feel that Murphy was an optimist!

- Any gold crown, when dropped, will roll into the least accessible corner of the dental operator, and will not be found until the cement has hardened.
- Any sharp scaler or probe, when dropped, will always stab you in the leg on the way down.
- A sure way for you to get behind schedule is for your nurse to inform you that you are ahead.
- Old instruments and study models accumulate to fill the storage space available.
- Any written instructions to your dental lab that could be misunderstood, will be misunderstood.
- When things are going well, something will go wrong.
Corollary 1. When things just can't get any worse, they will anyway.
Corollary 2. Any time things appear to be going better, you have overlooked something.
- No dental books or journals are lost except those you will eventually need.
- A mixing pad if dropped while you're mixing cement will always land cement side down. (This law was once tested in the Dental Clinic at the University of Toronto. Fifty students mixed cement on a mixing pad and then tossed them up into the air. Forty-nine of the mixing pads landed cement side down on the floor, while the fiftieth stuck to the ceiling.)
- Office overhead rises to meet income.
- Any office move or renovation will cost twice as much and take three times as long as originally estimated.
- An unexpectedly easy to handle sequence of dental procedures will be immediately followed by an equally long sequence of trouble.
- The chances of a new amalgam fracturing when the patient bites varies directly with the amount of time you spend carefully carving it.
- Rules for office staff: (1) The dentist is always right.
(2) When the dentist is wrong, refer to rule (1).
- Certain instruments or items that are crucial to a special dental procedure will show up with uncommon regularity until the day when that special procedure is planned, at which point the instruments or items in question will disappear from the face of the earth.
- The first 90% of a dental procedure takes 90% of the time and the last 10% takes the other 90%.
- All files, papers, old notes, etc. that you save will never be needed until they are disposed of, at which time they will become essential and indispensable.
- If you break a glass mixing slab, it will not be the one that was already chipped or cracked.
- A sure way to find a lost dental instrument is to buy a replacement.
- All necessary office supplies go on sale only after you have purchased them at the regular price.



Dr. Lang is orthodontic consultant to the editorial board of *Oral Health*. In addition to maintaining his private practice in Mississauga, he is a member of the orthodontic teaching staff of the University of Toronto Faculty of Dentistry, a past president of the Ontario Society of Orthodontists, and a consultant to the Registration and Licensure Committee of the Royal College of Dental Surgeons.

continued on page 10

- If it can break, it will, but only after the warranty expires.
- Experience varies directly with equipment ruined.
- When all else fails, read the instructions.
- If it jams, force it. If it breaks, it needed replacing anyway.
- In dentistry, there is no such thing as an absolute truth. That is absolutely true.
- You can lead a horse to water, but if you can get him to float on his back you've got something.
- A dental meeting lasts at least two hours, however short the agenda.
- The length of a dental meeting rises with the square of the number of dentists present.
- In any slide presentation, at least one slide will be upside down or backwards or both.
- The less you enjoy serving on dental committees, the more likely you are to be pressed to do so. (Explanation: If you do not like committees, you keep quiet, nod your head, and look wise while thinking of something else and thereby acquire the reputation of being a judicious and co-operative colleague; If you enjoy committees, you talk a lot, make many suggestions and are regarded by the other members as a loud-mouth and a nuisance.
- Every dentist has a scheme that will not work.
- While bryographic plants are typically encountered in substrata of earthy or mineral matter in concreted state, discrete substrata elements occasionally display roughly spherical configuration which, in presence of suitable gravitational and other effects, lends itself to combined translatory and rotational motion. One notices in such cases an absence of the otherwise typical accretion of bryophyta. We therefore conclude that "a rolling stone gathers no moss."
- Eat a live toad the first thing in the morning before going to the office, and nothing worse will happen to you the rest of the day. 

EDITOR'S NOTE:

I am sure that many of you have your own "Murphy Laws" that apply to the Dental Office. If you would like to share them with the rest of our readers, please send them to Miss Nancy Block, 2183 Davebrook Road, Mississauga L5J 3M4 and she will publish them in our journal at a later date.

JANUARY-MARCH ISSUE 1981 DEADLINE DATE FOR MATERIAL — JANUARY 7, 1981

MAIL MATERIAL TO:

Mrs. Heather A. Nikolaew
Editor, O.D.N. & A.A. Journal
113 Cathcart Street
LONDON, Ontario N6C 3M2
Phone: (519) 679-8208 (Res.)

Please! All articles must be printed and legible. Double spacing, allows room for editing and corrections. It is helpful if each submission is accompanied by a letter of explanation.

NOTE: When submitting an article, please send two (2) copies in order that one copy may be held on file as a "Journal Contest Entry" and the other copy can be used for editing and submission to the printer.

THE EDITOR

CANADIAN DENTAL NURSES & ASSISTANTS ASSOCIATION DELEGATE'S REPORT

The Canadian Dental Nurses and Assistants Association's National Convention, held in Halifax this summer, succeeded in re-organizing and clarifying what had become a rather confused operation.

Before delving into the details of my report on the national convention, let me congratulate our own Margaret Deichert on her election as Vice-President of the C.D.N. & A.A. Congratulations as well to Barbara Peterson of Alberta, who is now our National President. Both Barbara and Margaret have a rough year facing them since the National Association is still in a deficit position. I am sure they will, with our assistance, be able to turn things around.

The membership in the C.D.N. & A.A. in 1980 dropped to 1,901 full time members plus 424 student members. As you know, last year the Ontario Dental Nurses and Assistants Association opted out of compulsory membership in the C.D.N. & A.A. That position, and the reasons for it, are still basically sound. On the positive note, however, it is entirely possible that in the future, depending on the success of the new National Executive, a reconsideration of our provincial position may be justified.

One of the major decisions at the National Convention was in regards to the National Journal. Each delegate agreed that the journal must be improved as a means of communication between the various provincial bodies that make up the C.D.N. & A.A. Each issue is to have a message from the President, and the Certification Council Chairman's report. It was also recommended that the minutes of the Annual Meeting be included in the National Journal to enable all members across our great country to judge the actions taken by their National Body. A complete audited statement of the C.D.N. & A.A. financial operation will be included in the spring edition of the journal, a move that has been long overdue.

The emphasis in the coming year for the C.D.N. & A.A. journal will be information. Along that line it was agreed that smaller type will be used to save space for additional information which has been left out in the past.

Due to the past financial difficulties experienced by the C.D.N. & A.A., the Board agreed that the budget for 1981 must be approved by the entire Board in December, prior to its coming into effect in January. A special mail vote on the proposed budget will be taken. This will insure that the representatives from across the country, will have control over how your membership dollars are being spent, rather than the budget and finance committee, as has happened in the past by means of an interim budget. This one decision alone should ensure to a certain degree a better and more accountable financial operation.

Respectfully submitted,

BRENDA J. MOFFATT, C.D.A.
President, O.D.N. & A.A.

ASSERTIVENESS TRAINING FOR DENTAL NURSES AND ASSISTANTS

by Pat Hacker and Helen Doyon, partners in the firm "Women's Career Consulting Services," Ottawa.

Helen Doyon has five years of experience as a teacher, two years as a career counsellor and four years as a human relations trainer. She holds a Master's Degree in psychopedagogy and is trained in group leadership and counselling. Ms. Doyon has worked extensively in the area of women and their employment related needs.

Pat Hacker holds a B.A. in Sociology and is currently pursuing graduate degrees in both Social Work and Education. She has been engaged full time in career and lifestyle counselling for the past six years and offers human relations training for departments of the federal government as well as private organizations.

What relevance does Assertiveness Training have for dental nurses and assistants? How is it applicable to the specific work situations and the personal concerns of these women?

These are the questions we attempt to address in our assertiveness training seminars. Situations may include working for one or more busy dentists, working in a non-unionized workplace where overtime is taken for granted, where wages are lower than elsewhere in the general population for women with the same or similar training, responsibility and experience, where sexual harassment may exist, where care, precision, exactness and friendliness are essential parts of the job, and where, despite the difficulties, women like their work.

Assertiveness training, as we present it, stresses the right of the individual to act in her own personal interest, to stand up for herself without undue anxiety, to express her feelings comfortably and do all of this without denying the rights of others; without being selfish and uncaring and insensitive.

Many people believe that to be assertive one must act in an aggressive manner. Nothing is further from the truth. At the very beginning of our seminars we do exercises that clarify and distinguish assertive behaviour from aggressive, passive, and passive-aggressive behaviours.

We identify the characteristics of these four types of behaviours, we learn to spot them in ourselves and in others, and we immediately begin to practice behaviours that will either replace, deflect or eliminate their occurrence.

We discuss the process of our socialization and examine how it is that we came to handle stress, conflict and tension in the particular ways we do. We talk about our rights as individuals, within the workplace, and in the various roles we fill as nurses or assistants, as co-workers, as wives, mothers, lovers, friends, and as women.

Assertiveness training is about communication, and part of communication includes body language as well as speaking. We practice being aware of our own and others' body language, facial expressions, gestures, eye contact, choice of words, timing, and the congruence of all these parts. We talk about and practice getting your message across — and feeling good about it.

Assertiveness training is also about confidence, and we seldom meet a woman who feels she is as confident as she would like to be. Confident and assertive is the way you feel when you walk away from a personal transaction with another individual or group of individuals knowing that you handled yourself and your share of the interaction in the most honest and direct way possible, and you feel good about yourself, and, if possible, the other person. Feeling good about oneself does not necessarily mean that you won your point or achieved your desired goal. It means that you expressed your feelings honestly and comfortably without denying the rights or feelings of others.

If you are wondering now about whether or not Assertiveness Training would be of use to you, let us put a few questions to you:

DO YOU FEEL COMFORTABLE, CONFIDENT AND ASSERTIVE IN THE FOLLOWING SITUATIONS:

- Turning down a request to borrow money
- Turning off a talkative friend
- Initiating conversation with a stranger
- Requesting a meeting or a date with someone
- Applying for a job
- Telling someone that you like them
- Resisting sexual overtures when you are not interested
- Telling a person when you feel he/she has done something that is unfair to you
- Telling a friend or someone with whom you work when he/she does something that bothers you
- Quitting a job
- Receiving compliments
- Continuing to converse with someone who disagrees with you
- Requesting the return of borrowed items
- Refusing an invitation without making elaborate excuses
- Asking a person who is annoying you in a public situation to stop, such as a smoker, or someone who is talking during a film or concert.

If you feel as assertive and confident as you would like to feel, and act, in these situations, then you probably won't be interested in Assertiveness Training. If, on the other hand, you feel you would like to be more comfortable and confident and assertive about these situations and others, you might want to seek some Assertiveness Training with your Association or in a community group. 

EDITOR'S NOTE:

For any affiliate association or group that would be interested in having Pat Hacker and/or Helen Doyon come to a work shop or clinic day please contact:

Mrs. Susan Caws, P.D.A.
25 Riverside Cres.,
Box 754,
Manotick, Ontario K0A 2N0

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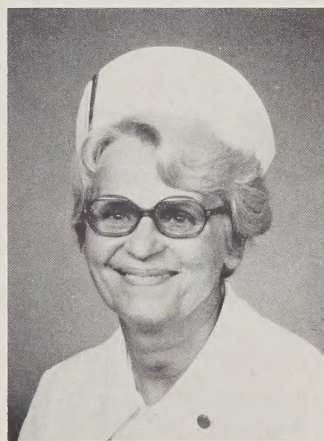
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CAPS

MASKS? SAFETY GLASSES? LEAD APRONS?

Who needs them?

by Margaret Whitcombe, Hamilton, Ontario

We do!! Although we often don't like to think about it, dental assistants have a most hazardous job. Everyday we deal with poisonous chemicals, x-rays and infectious material. If we were to stop and consider the hazards, without knowing the precautions available, we would probably be looking for another line of work. Here I would like to mention briefly some of the obvious problems and I hope this will prompt you to do your own research in the different areas.

First, how many of us fail to take any precaution to protect our eyes during our work. It would take only a tiny piece of flying amalgam to seriously injure an eye. A very simple personal precaution is the wearing of safety glasses. These can be ordered from a dental supply company or you can have them made up with your choice of optical frame from an optician.

Flying debris also affects the respiratory system. We cannot help breathing air that is full of spray from the highspeed handpieces and airborne bacteria are constantly being introduced into the air. Shouldn't we take the simple precaution of wearing a surgical mask? Sure, we might feel a little uncomfortable at first but in the long run our health and peace of mind will be better for it.

Other health hazards are not as obvious. For example in the dental office there is exposure to mercury vapour and x-ray radiation, with the attendant possibility of mercury and radiation poisoning. Did you ever wonder why the Mad Hatter in Lewis Carol's, "Alice in Wonderland" was mad? It was due to mercury poisoning because in the 18th and 19th centuries, mercury was used in the production of felt for hats. This of course is an extreme case but continuous exposure to mercury vapour can cause symptoms including, deterioration of the brain cells, loss of motor control, involuntary movement and irritability. How many of us have spilled a bit of liquid silver and swept it under the counter where it was out of sight and out of mind? Extreme care should always be employed when dealing with mercury in any form and spills should be cleaned up as soon as they occur. Avoid skin contact and keep all containers tightly sealed. Spillage clean-up kits are available from most chemical supply firms consisting of a mixture of calcium oxide and sulphur. These substances when mixed with water are effective in reducing the level of mercury vapor.

Radiation exposure is another hazard. Some people feel that what they can't see, can't hurt them. This of course, is far from true. Anyone using or coming into contact with a radiation source must be made aware of the problems and the precautions that can be taken.

Legally, the first installation of a radiation source must be examined and approved by the government regulatory agency. From then on it is up to the individual owner to check for changes in the machine's function. These changes can be observed on the monitoring badges and in the quality of the radiographs. All personnel working with or in the same office as an x-ray machine should wear a monitoring

badge. These are provided at a nominal fee to anyone working near a radiation source. The badges are sent to the Radiation Regulatory Bureau at regular intervals where they are processed. A report is then sent back and this can alert the exposed to changes in the radiation exposure. The health hazard from radiation comes from repeated exposures rather than large doses in one exposure. This is why most reports regarding dental X-rays state that there is little danger to the patient, who only receives one set of very short exposures every six months. This accumulated amount does not present a health hazard, especially if proper precautions such as the use of a lead apron and thyroid collar are taken. There is however a danger to the operator, usually a dental assistant, if proper precautions are not taken. Simple measures can be taken which make the use of x-rays as safe as possible.

First, as I mentioned previously, all personnel should wear monitoring devices. Second, never stand in the same room or in the path of the radiation. Be sure the switch is on a long enough cord that you can leave the room or stand at least six feet away. Thirdly, *never* hold the film in the patients mouth. If the patient is a child or a disabled person and cannot properly position the film, have the parent or a friend assist. These are three simple steps that we can all take to reduce the possibility of your over exposure to radiation.

All these items I have mentioned are precautions we can personally take advantage of, without interfering in the running of the office. Offices should provide safety glasses, surgical masks, mercury cleanup kits and leaded walls but in cases where these have been neglected, we as individuals can reduce the possibility of work related health problems by taking these few precautions. I have only touched the tip of the vast quantity of information in these areas. I hope this article will spark your interest and curiosity enough to initiate your own research into this area. I would suggest you read thoroughly all articles in the professional journals and government reports, assess this information and learn for yourself to what extent these problems affect you.



MISCELLANEOUS AND OTHERWISE . . .

- Psychiatrists tell us that one out of five Canadians is mentally ill. Check your friends. If four seem all right, you're the one.
- A pat on the back develops character — if administered young enough and low enough!
- Knowledge is like a garden — if it is not cultivated, it can not be harvested.
- You should always be interested in the future because that's where you're going to spend the rest of your life.

HEARTBEAT

HYPNOSIS IN DENTISTRY

by Chris Whitehead, Lorne Park S.S., Mississauga, Ont.

That "big" needle, the "drill", and the "yanking and pulling" of teeth for some unknown reason seem to give most people a "slight" apprehension about visiting their dentist. In fact, some come to think of the dental operatory as a modern-day "torture chamber". When you must go to the dentist though, how do you overcome this fear?

A common practice is to administer some sort of premedication for those who can't bear the thought of having the dentist even look at them. An old technique is now being introduced more frequently in offices — Hypnosis. "Isn't that what magicians and people who dabble in the world of mystical wonders use though?" you may ask. As tradition has it — yes, but it is now being effectively used by qualified dentists in the aid of relieving fear from their patients. It seems strange that an art that is equally as old as dentistry, and then some too, shouldn't have been thought of as a major tool in dentistry, sooner. Consequently, it has been proven to be extremely effective and advantageous in many aspects. With a willing patient, and a trained dentist, many problems often present can be overcome.

It is based on redirecting the patient's thoughts to only those which give the patient pleasant, and contented feelings. In doing this, with the aid of the dentist, the patient is not concerned with what the dentist is doing in their mouth — be it a simple prophylaxis treatment or extensive restorative treatment. The patient is still totally aware of what is going on, and contrary to belief, is not put to sleep. The patient cannot be made to do anything he wouldn't normally do, however, the resulting effects of hypnosis are amazing. It clearly seems to be the ideal way to do any work. With practice and co-operation, some

patients can even have extensive operative work done without the use of any anesthetic, by going into a deeper level of a hypnotic state. Hypnosis totally relaxes the body, resulting in advantageous effects on the body. In repeatedly documented cases, it is proven that while under hypnosis, the patient's blood coagulation is increased — with a faster healing process afterwards. The salivary activity slows down and the patient's memory of the whole experience is non-existent. With the ability of being able to eliminate anesthetics in some cases, this reduces the risk of any after effects resulting from a chemical reaction from any drugs that might have been used. The patient only has pleasant memories of being at the office and may look forward to it as an especially relaxing period when hypnosis is used. This practice would possibly reduce the production of caries in that the patient would no longer put off going to the dentist because of fear.

This rediscovery of using a little "Hocus-Pocus" could prove to be a giant step in the advancement of improved dental treatment. 

JOURNAL CONTEST ENTRIES

Want your name on a Trophy Award list next year? Write an article or two for the Journal. This contest is open to all Dental Assistants and Dental Assistant students. It may be any length or subject (preferably dentistry).

Please send two (2) copies of your article and be sure that both copies are typed or printed completely legible.

DOUBLE SPACE PLEASE!

Submit your article to:

Mrs. Heather A. Nikolaew
Editor, O.D.A. & A.A. Journal,
113 Cathcart Street,
London, Ontario N6C 3M2

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DIET

by Merial Haggarty, C.D.A.



Diet, diet, diet! Most people would agree that today diet (outside of the weather) is probably the most talked about subject (amongst women) and even secretly, amongst the fellows.

In a country where we have more than enough to eat (I am thinking about Canada and the U.S.A. as I am now in Kenya, Africa where we are suffering from severe drought) everyone is concerned about the "rolls" around the tummy, perhaps their difficulty in getting breath, and just the plain old fact that their clothes don't fit, so they set out determined to start on a "fad" diet, a diet of starvation, or some other kind of diet. The problem with this is that, although weight may be lost fast, often the body is starved for the proper foods and after awhile the individual gains all this unwanted weight back again and he/she becomes discouraged, perhaps even depressed.

I have heard that a fat ten year old will in all probability be a fat adult because the child has never been taught to eat the proper foods and to eat at regular times. The medical profession has proven that fat babies and fat children don't mean healthy children; in fact it has been proven just the opposite. Thus as the child grows he/she carries poor habits over into his/her adult-hood. As an adult it is too late to correct what happened in your childhood, but you can begin a new life for yourself by correcting the bad habits you are now practising. Don't you dare believe that you are too old! There are some points you must adhere to if you want to lose weight properly and *keep that weight off!*

My doctor here in Kenya (he is a Seventh Day Adventist*) of which I am not, told me, "Merial, if you don't lose weight you will look like a jelly fish." Seventh Day Adventists do know how to eat properly. I am so happy he did make this statement (he can't even remember making it but it shook me up to a realization that I needed to do something). All my weight was around my tummy while my arms and legs were very small, and I was extremely self-conscious about this fact. Having had back trouble for many

years, everytime I did exercises I suffered from severe pain in my back and legs. I had a very successful double fusion spinal operation which limited certain exercises and also necessitated keeping my weight down. I liked my morning and afternoon coffee with 2 of my home-made cookies. I read in a medical book that a person who drank 5 or more cups of coffee per day was an excellent candidate for a heart-attack. I like to be excellent in things, but not in having a heart-attack! My blood pressure was high and the medical profession now also claims that caffeine in coffee and tea can and is often a factor in high blood pressure, as well as contributing to over-weight. Twice on 'Voice Of America' I heard that the American Medical Profession is urging pregnant mothers not to drink coffee and tea as they are producing heart defects and loss of limbs in new born babies. We dental nurses also know that it stains the teeth. Sugar often added to these drinks not only puts on weight but destroys the teeth, just as do carbonated beverages. I knew coffee and snacking was my main problem.

Well, a doctor needs to give help as well as a scolding. My doctor told me "eat a huge breakfast until you feel stuffed and you will have lots of energy for the day, a big lunch and no supper, perhaps a small piece of fruit". Going without supper (at first) drove me crazy, not because I was hungry, but because it was something to do. Since I am a strong-willed person and also because of my faith, I was able to fight the urge to snack and eat supper. My breakfast might consist of cereal topped with fruit, a piece of toast with margarine and peanut butter and a poached or boiled (not fried) egg, along with a glass of skim milk, or a non-fattening hot drink. I have learned to like Postum (1/2 tsp. with a tablespoon of skim milk, which equals 17 calories.) Something I do that many of you would refuse to do, is that I figure out the number of calories in a recipe and how many servings it yields so that I know just how much I can eat. In this way I plan my menus and this is fun. Planning menus is something every cook should do to ensure proper eating. A big breakfast takes away the desire to snack. No supper makes one look forward to breakfast. It has a psychological effect when you say "if I don't eat supper I can't sleep".

Now I know that some only have time to prepare and eat a meal in the evening. Okay, eat as early as you can and for lunch have something light like a salad with low calorie dressing, some fruit or juice. Exercise must go with dieting. If you eat a supper, go for a fast walk afterwards to wear off the calories. My exercise is walking at a fast pace and swimming, along with some knee-bends. You decide on what you will do and make it enjoyable as you won't keep it up unless you find it fun. No exercise encourages flabby muscles.

My doctor recommended that I read an excellent and very sensible book, "Live Longer Now". It has been 1 1/2 years now since I went on my diet. I lost 27 lbs. and haven't gained an ounce back. My bathroom scales help me each morning to check my weight.

Oh yes, I allow myself dessert on the week-end and if invited out where it is impossible to count calories, I cut down on my calories intake the next day. I eat fruit during the week if I have the desire for dessert; I have learned fruit is much more satisfying than pastry, which shoots your sugar up and then lets it rapidly fall, leaving one with a tired feeling. I find it fun to plan menus and have a real sense of pride and acceptance of self in being slim and healthy.



*A religious denomination that holds their church service on Saturday instead of Sunday.

NOTE: This article was submitted by Merial during her stay in Kenya, Africa. In August 1980, Merial Haggarty returned to her home in Sarnia, Ontario.

DON'T TELL THE EDITOR IF...

...you change your name or address, it is important that you notify our Executive Director.

Please write to:

Mrs. Ann Phippen,
Executive Director,
345 Dixon Road, Apt. 406,
WESTON, Ontario M9R 1S6

REMEMBER!
DON'T FORGET YOUR POSTAL CODE!!

Making sure that we receive any changes will ensure that you don't miss "The Journal" or any other material from the Association.

Thank you

MEMBERSHIP

Ann Phippen, our Executive Director, would like to announce that membership notices are in the mail. The format of the renewal notice has been changed this year. Please read the information included with your renewal notice very carefully. Please reply early. (Return both copies)

This is your organization, but it can only represent you if you make your views known. Members are asked to give their suggestions in writing to their Representative. With each Affiliated Association having representation on our Board of Directors, the Representatives will forward your suggestions to myself, Brenda Moffatt or Ann Phippen at our Board Meetings.

Please help the Executive of this Association to serve more efficiently by working with your elected Representative to our Board.

PAT HOWES
Membership Chairman

ISN'T IT THE TRUTH

"Oh I wish I'd looked after my teeth,
And spotted the perils beneath.
All the toffees I chewed,
And the sweet sticky food,
Oh, I wish I'd looked after my teeth."

I wish I'd been more willin'
When I had more teeth there than fillin'
To pass up gobstoppers
From respect to me choppers,
And buy something else with me shillin'.

When I think of the lollies I licked,
And the licorice allsorts I picked,
Sherbet dabs big and little
And that hard peanut brittle,
My conscience gets horribly pricked.

My Mother, she told me no end
"If you got a tooth, you've got a friend."
I was young then, and careless
My toothbrush was hairless,
I never had much to spend.

Oh I showed them the toothpaste alright,
I flashed it about late at night
But up and down brushin'
And pokin' and fussin'
Didn't seem worth the time -
I could bite!

If I'd known I was pavin' the way
To cavities, caps and decay,
The murder of fillin'
Injections and drillin's,
I'd have thrown all me sherbet away.

So I lay in the old dentist's chair,
And I gaze up his nose in despair,
And his drill it do whine,
In these molars of mine,
"Two amalgom," he'll say, "for in there."

How I laughed at my mother's false teeth,
As they foamed in the waters beneath,
But now comes the reckonin'
Its ME they are beckonin'
"Oh, I wish I'd looked after my teeth."

Author Unknown

Submitted by:

Valerie Lynn Clarke, C.D.A.
Toronto Affiliated Association
O.D.N. & A.A. TORONTO, Ontario.

ARE YOU A 50 YEAR MEMBER?

If you are a 50 year member or know of any
50 year members please contact:

Mrs. Patricia A. Miller,
155 Gardenwood Drive Apt 202
LONDON, Ontario. N6J 4C4

NOW!

AFFILIATED ASSOCIATION NEWS

Past Events

OTTAWA

Saturday, May 31, 1980, the Ottawa Dental Assistants held a morning workshop at the Talisman Motor Inn.

Pat Hacker and Helen Doyon, of the Women's Career Consulting Services, provided an introduction to assertiveness training, specifically geared to the work situation of dental assistants. A very lively and enthusiastic response was given these women. All members present felt they would like to hear further from these speakers. Arrangements are now being made for a return visit, don't miss them.

The second speaker was Ottawa Lawyer, Lynn Kaye, from the Canadian Union of Technical and Professional Employees. Lynn spoke briefly on "Women's Rights and the Labour Code", outlining the Registered Nurses struggle for Professional recognition. After hearing Lynn reply to a number of inquiries from the members, it is apparent that a signed contract upon employment is desirable. This initial contract should provide both parties with the terms of employment. Future bargaining and negotiating for pay and benefits can then take place from this platform. Lynn stressed the need for all members to support their professional association.

SUSAN M. CAWS, P.D.A.
Publicity Representative

SIMCOE COUNTY

March 18th, 1980

Our guest speaker was Dr. G. James, Orthodontist from Orillia. He showed some very dramatic 'before and after' slides of some of his more difficult cases that were treated not only with orthodontics but also with oral surgery.

April 8th, 1980

Following the business meeting, our guest speaker was Mrs. Barbara Smith who is in charge of Physiotherapists at the Royal Victoria Hospital in Barrie. Mrs. Smith's topic "Physiotherapy and the Athlete" was based on her experiences as a physiotherapist in the poly-clinic at the Montreal Olympics in 1976.

May 13th, 1980

Our guest speaker was Dr. K. Morley from the Dental Corps School in Canadian Forces Base Borden. Dr. Morley showed slides and discussed what's new in preventive dentistry.

June 10th, 1980

This was our final meeting until September. Following the wind-up dinner in Barrie we all went to the home of one of our members for a little socializing.

MRS. ANNETTE DE CROMBRUGGHE,
Board & Accreditation Rep. (1979-80)

AFFILIATED ASSOCIATION NEWS

Up-coming Events

BAY OF QUINTE

President — Mrs. Susan Moorcroft, 262 West College Street, Belleville, Ont. (613) 962-5013, Business phone (613) 962-1370.

Secretary — Ms. Marie McGowan, 181B Byron Street, Trenton, Ont., (613) 394-4508, Business phone (613) 394-2090.

Treasurer — Ms. Leslie MacDonald, 42 Third Avenue, Trenton, Ont., (613) 392-0964, Business phone (613) 294-2090.

BRANT

President — Miss Annette Quattrociocchi, 30 Dunsdon St., Brantford Ont., (519) 753-1739, Business phone (519) 753-7342.

Secretary — Miss Nancy Pelton, 33 Memorial Dr. #502, Brantford Ont., N3R 5R8, (519) 759-8627, Business phone (519) 759-2590.

Treasurer — Miss Maria Saroka, 97 Park Avenue, Brantford, Ont. N3S 5H4, (519) 753-9547, Business phone (519) 753-7342.

HALTON-PEEL

President — Miss Shonna Black, 37 Edenborough Drive, Bramalea, Ont. L6T 3A3, (416) 453-2999.

Secretary — Miss Beth Simpson, 2570 Argyle Road #2609, Mississauga, Ont., L5B 1V2, (416) 279-0489.

Treasurer — Ms. Isabel Rodrigues, 1563 Sandgate Crescent, Mississauga, Ont., L5J 2E3 (416) 822-1894.

HAMILTON

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After our last meeting of the 1979-80 season, all members of the Executive were returned to office for another year.

After several Executive meetings during the summer we hope we have put together an interesting schedule for this new season.

Our meetings are held at the Hillcrest Restaurant in Hamilton, and start with cocktails at 6:00 p.m. followed by a lovely dinner before we get on with our business meeting and our guest speaker for the evening. We have an attendance of 25-65 members each month.

Following is a summary of our meetings as planned to date:

Sept. 23 — A lady gynecologist

Oct. 23 — Dr. McIsaac — Paedodontist

Nov. 18 — Dr. Stechey — Implants

Jan. 20 — Bell Canada

Feb. 17 — Bosses Night

Mar. 17 — Dr. Sherman — Endodontist

April 21 — Fashion Show and Election Night

We are hoping our new year will be enjoyed by an even better attendance.

MRS. MARILYN CUTAIA, C.D.A.

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This is a summary of the speakers we will have from September through December 1980.

September — In Kingston (our first fall meeting)

Guest Speaker — Miss Helen King (lawyer)

Topic — "New Legislation Concerning Women"

October — In Brockville

Guest Speaker — Mrs. Wilma O'Connell

Topic — "Palliative Care"

November — In Kingston

Guest Speaker — Dr. D. L. M. Williams

Topic — "Ear, Nose and Throat" (Specialist)

December — Christmas Party — Social.

MRS. MARLENE PETERSON, P.D.A.

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September 16, 1980 (Tuesday) — Our first meeting of the year opens with physical fitness on our minds. Our guest speaker is Mr. Jeff Stapleton — the Fitness and Exercise Co-ordinator at the Highbury Racquets Club here in London. Mr. Stapleton's topic will be "Commitment to Physical Fitness — what does it really involve?" The meeting will be held in the "Busby Room" at Victoria Hospital, London.

October 14, 1980 (Tuesday) — National Refining Company — London Branch will be hosting our October meeting with their yearly traditional "Wine & Cheese". A "Handpiece Maintenance" Demonstration will be given — with wine and cheese to follow. The evening commences at 7:30 p.m. at National Refining — 540 Clarke Rd., London.

November 25, 1980 (Tuesday) — Our November meeting will be held at the National Traveller, Salon "B". The guest speaker will be Dr. W. Feasby, Chairman of the Pedodontic Dept. at U.W.O. and Victoria Hospital, London. Dr. Feasby's topic will be "Habit Control". The meeting will commence at 7:30 p.m.

December 16, 1980 (Tuesday) — "DENCO" will host our Christmas Social this year. The guest speaker will be Eva Young from DENCO in Toronto. Speaking on a topic relating solely to the "Dental Assistant". Wine & Cheese will follow the speaker. (More detailed information on this meeting can be obtained at our November Meeting.)

All the above meetings will commence at 7:30 p.m. on the above slated dates unless otherwise stated.

If anyone, should require more information on the above meetings, etc., please contact me at my office (519) 672-5260 or my residence (519) 438-4876.

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September 18, 1980

Opening "Get Acquainted" Meeting
7:00 p.m. Dinner, Keg & Cleaver — Sarnia.

October 16, 1980

Wine & Cheese Evening
Sponsored by National Refining of London
Speaker provided by National Refining
7:30 p.m. — Guildwood Inn, Room #138 Sarnia.

November 20, 1980

2nd Annual Fashion Show
Sponsored by Uniforms Unlimited of Sarnia
Cocktails & Dinner 6:30 p.m.
Canterbury Inn, Sarnia

December 11, 1980

Xmas Dinner Meeting
Sarnia Riding Club (tentative)
7:00 p.m.
No speaker available to date.

January 15, 1981

Dinner Meeting — Canterbury Inn 7:00 p.m.
Speaker: Mr. Smith of Business Bookkeeping of Sarnia
Topic: All those things you should have known about your income tax return last year!

February 19, 1981

Dinner Meeting — Canterbury Inn Sarnia
7:00 p.m.
Speaker: Dr. R. Brooke London (tentative)

March 12, 1981

Wine & Cheese Evening
Sponsored by Healthco of London
Speaker provided by Healthco
7:30 p.m. Guildwood Inn

April/1981

Convention

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Treasurer — Miss Bonnie Smith, 6 - 58 Bloor St. W., Sudbury, Ont. P3C 2K6, (705) 673-8176, Business phone (705) 522-9432.

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Once again we wrapped up our year with a very successful and enjoyable picnic on June 18th at the home of Trish and Cathy Moore. A good time was had by all who participated in the many games and the barbecue that followed.

Now that Fall is closely approaching we look forward to resuming our meetings which include a wide variety of subjects and speakers that hold interest for all.

Sept. 17th — The Conestoga Inn will be the site of our first meeting featuring a Uniform Fashion Show.

Oct. 22nd — We eagerly look forward to our October meeting with guest speaker Colleen Benn on the topic "Self Improvement and Dancercize" at the Lafontana Restaurant.

Nov. 12th — "Battered Wives" with guest Jean Kirkham from Anselma House will be the topic of November's meeting to be held at the Edelweiss Tavern.

Dec. 10th — With the holiday season upon us the Charcoal Steakhouse was chosen as the site for our annual Christmas Party.

Dec. 17th — Dentist and staff Christmas Party.

BARBARA NIELSEN
Corresponding Secretary

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SPECIAL "GOLDEN" ISSUE

DEADLINE DATE — OCTOBER 31, 1980

In honour of our golden anniversary we are publishing a special issue of the journal — our "Golden Issue". If you have or know of any material (article, history or photographs) pertinent to this issue that we may be able to use, please mail to:

MRS. PAT MILLER
202-155 Gardenwood Drive,
London, Ontario N6J 4C4

Please send a covering letter with your submission in order that we may contact you if necessary.

THE EDITOR

MAX HANNA LUCKY DRAW OCTOBER-DECEMBER 1980

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Only Members of the O.D.N. & A.A. can participate in the lucky draw. No other entries will be accepted. Each participant in the lucky draw will only be allowed to win once per year. The Judge's decision will be final.

MAIL ENTRY TO: Mrs. Heather A. Nikolaew, Editor O.D.N. & A.A.

113 Cathcart Street, LONDON, Ontario N6C 3M2

ENTRIES MUST BE RECEIVED BY DECEMBER 1, 1980

CIGARETTES CAUSED HEART ATTACKS IN FIT WOMEN UNDER 50

BOSTON(AP) — Cigarettes caused three-quarters of the heart attacks suffered by a group of otherwise-healthy women under age 50, researchers said. They warn that such attacks are likely to increase as more teen-age girls take up smoking.

The doctors also found that heavy-smoking women under age 50 are about 20 times more apt to have heart attacks than are non-smokers. Half the time, these attacks are fatal.

The study, conducted at Boston University Medical school, was published in the New England Journal of Medicine.

The doctors estimated that about one-third of the young women in the study who suffer heart attacks — or myocardial infarctions — had no underlying illnesses, such as high blood pressure, that might have been the cause.

"Our findings suggest that in this category, some 75 percent of infarctions could be avoided if women did not smoke," the doctors said.

Heart attack is the biggest killer in the United States. Each year, about 40 of every 100,000 or 10,000 women under age 45 suffer heart attacks. The rate is four to five times higher for men.

The study is the first to be limited to otherwise healthy women who had no reason to suspect that they were in danger of having heart attacks. The researchers compared 55 women under age 50 who had had heart attacks with a control group of 220 women matched for age and area of residence.

The research, directed by Dr. Dennis Slone, found that women who smoked 35 or more cigarettes a day were 21 times more likely to have heart attacks than non-smoking women.

Reprinted from HEARTBEAT

QUOTATIONS

If you expect perfection from people, your whole life is a series of disappointments, grumblings and complaints. If, on the contrary, you pitch your expectations low, taking folks as the inefficient creatures which they are, you are frequently surprised by having them perform better than you had hoped.

BRUCE BARTON

We have no more right to put our discordant states of mind into the lives of those around us and rob them of their sunshine and brightness than we have to enter their houses and steal their silverware.

JULIA MOSS SETON

INSPIRATIONAL THOUGHTS

by Dr. Stuart E. Rosenberg

It's hard to sit on top of the world when you are alone.

Even a mountain climber reaches a peak and can go no higher. Swimmers and racers have their allotted margins of endurance — not to speak of man's machines, which burn out after whirring through their "lifespan." In the realm of the physical world, we reach high points which prevent our going any further. We reach a state of exhaustion.

But it is not so with a man's spirit:

We can wear our minds out in study, and there is always more mind with which to study.

We can give our heart in love, and yet there is always more heart with which to love.

When we show great compassion and pity, instead of becoming weak, we become very strong. The more we give of ourselves, the more we have left to give.

Too many of us aim for milestones that turn out to be monumental deadends. Sometimes we spend a whole lifetime just getting ready to set out for the mountain tops of our desires. When we get there, we discover no place to go but down.

This happens to people whose goals are purely material for whom reality consists only of the tangible, the visible, the current, and the immediate goods of life.

How many lives have been wasted in the pursuit of unhappy happiness — in the quest for a joy that fades and jades, that flickers and dies?

Even our luxuries have their boundaries. A man cannot sleep on more than one bed at a time or drive two automobiles at once.

Material possessions cannot buy love and sweet friendship. When you are all alone, you can't easily sit on top of the world.

The real satisfactions in life are those that touch the spiritual dimensions on man's being. There the questions are different: Not how much you have or what you have acquired — but how much have you given and what have you rejected. Not what you have desired, but what you have needed. Not the speed of your achievement, but the direction of your thought.

And most important: Not the mountains you have climbed but how you have walked through the valleys of shadows.

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